

Pro Se 1 (Rev. 09/16) Complaint for a Civil Case

UNITED STATES DISTRICT COURT

for the

District of Massachusetts

DAVID NICKERSON

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

CHILD SUPPORT SERVICES of N.H.

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

Case No. _____

(to be filled in by the Clerk's Office)

Jury Trial: (check one) ☒ Yes ☐ No

FILED
IN CLERKS OFFICE
2018 FEB 28 PM 12:26
U.S. DISTRICT COURT
DISTRICT OF MASS.

COMPLAINT FOR A CIVIL CASE

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

DAVID NICKERSON PRO SE

Street Address

91 LUPINE RD. LOWELL MIDDLE SEX MASSACHUSETTS

City and County

State and Zip Code

MASSACHUSETTS 01850

Telephone Number

978 596-6222

E-mail Address

DAVIDNICKERSON15@GMAIL.COM

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known). Attach additional pages if needed.

CHILD SUPPORT SERVICES OF N.H. (AGENCY) CHELSEA MALIZIA, SHERIE COLLIGAN
JOHN T. PENDLETON, JEFFERY A. MEYERS, MARY S. WEATHERILL, CATHERINE
DAVIDOW,

DIANE P. CARON, N.H. DIVISION OF FAMILY 10 CIRCUIT COURT OF N.H. PORTSMOUTH,
~~SARAH DEVEREUX~~ DIRECTOR OF MOTOR VEHICLES OF N.H. REGISTRY

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Defendant No. 1

Name CHELSEA MALIZIA,
 Job or Title (if known) CHILD SUPPORT SERVICES OF N.H.
 Street Address _____
 City and County CONCORD N.H. DIV. OF CHILD SUPPORT SERV. OF N.H.
 State and Zip Code _____
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 2

Name SHERIE COLLIGAN
 Job or Title (if known) _____
 Street Address _____
 City and County CONCORD
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 3

Name JOHN T. PENDLETON,
 Job or Title (if known) DIV. OF CHILD SUPPORT SERVICES OF N.H.
 Street Address _____
 City and County CONCORD
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 4

Name JEFFERY A. MAYERS
 Job or Title (if known) DIV OF CHILD SUPPORT SERVICES OF N.H.
 Street Address _____
 City and County CONCORD
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

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Defendant No. 1

Name MARY S. WEATHERILL
 Job or Title (if known) DIV. OF CHILD SUPPORT SERVICES OF N.H.
 Street Address _____
 City and County CONCORD
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 2

Name CATHERINE DAVIDOW,
 Job or Title (if known) (ATTY) DIV. OF CHILD SUPPORT SERVICES OF N.H.
 Street Address _____
 City and County CONCORD
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 3

Name DIANE P CARON
 Job or Title (if known) CLERK OF COURT
 Street Address 111 PAROT AVE PORTSMOUTH N.H.
 City and County PORTSMOUTH
 State and Zip Code NEW HAMPSHIRE
 Telephone Number _____
 E-mail Address (if known) _____

Defendant No. 4

Name ELIZABETH RIBECKI
 Job or Title (if known) (REGISTRY OF MOTOR VEHICLES) DIRECTOR
 Street Address (SUSPENSIONS)
 City and County EPPING N.H.
 State and Zip Code EPPING.
 Telephone Number NEW HAMPSHIRE
 E-mail Address (if known) _____

II. Basis for Jurisdiction

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation and the amount at stake is more than \$75,000 is a diversity of citizenship case. In a diversity of citizenship case, no defendant may be a citizen of the same State as any plaintiff.

What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal question ☐ Diversity of citizenship

Fill out the paragraphs in this section that apply to this case.

A. If the Basis for Jurisdiction Is a Federal Question

List the specific federal statutes, federal treaties, and/or provisions of the United States Constitution that are at issue in this case.

5TH AMENDMENT VIOLATION 7TH AMENDMENT VIOLATION 11TH AMENDMENT
 "FRAUD" (ACT 1911) "MISREPRESENTATION", VIOLATIONS OF DUE PROCESS OF LAW
 DENOVATION OF RIGHTS, LIFE, LIBERTY, AND THE PURSUIT OF HAPPINESS UNDER COLOR OF LAW
 ENFORCEMENT OF CHILD SUPPORT SERVICES UNDER COLOR OF LAW, "COLLUSION"

B. If the Basis for Jurisdiction Is Diversity of Citizenship**1. The Plaintiff(s)****a. If the plaintiff is an individual**

The plaintiff, (name) DAVID NICKERSON, is a citizen of the
 State of (name) MASSACHUSETTS, PRIOR STATE WAS N.H.

b. If the plaintiff is a corporation

The plaintiff, (name) "ALL AFFECTED PARTIES", is incorporated
 under the laws of the State of (name) _____,
 and has its principal place of business in the State of (name) _____

PRIOR BUSINESS WAS LISTED ON HAMPTON BLVD N.H. 03842

(If more than one plaintiff is named in the complaint, attach an additional page providing the same information for each additional plaintiff.)

2. The Defendant(s)**a. If the defendant is an individual**

The defendant, (name) ALL PARTIES DEFENDANTS, is a citizen of
 the State of (name) MASSACHUSETTS NEW HAMPSHIRE or is a citizen of
 (foreign nation) _____

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Defendant No. 1

Name

THE STATE OF NEW HAMPSHIRE

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Defendant No. 2

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Defendant No. 3

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

Defendant No. 4

Name

Job or Title (if known)

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

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b. If the defendant is a corporation

The defendant, (name) CSS, FAM DIV, REGISTRY ^{STATE OF N.H.}, is incorporated under the laws of the State of (name) NEW HAMPSHIRE, and has its principal place of business in the State of (name) NEW HAMPSHIRE.
 Or is incorporated under the laws of (foreign nation) _____, and has its principal place of business in (name) NEW HAMPSHIRE.

(If more than one defendant is named in the complaint, attach an additional page providing the same information for each additional defendant.)

3. The Amount in Controversy

The amount in controversy-the amount the plaintiff claims the defendant owes or the amount at stake-is more than \$75,000, not counting interest and costs of court, because (explain):

UNREBUTTED CLAIMS OF UNLAWFULLY APPROPRIATED FUNDS FROM NICOLE NICHOLSON UNDER THREAT OF FINANCIAL, CREDITORY, HARDSHIP, SUSPENDING PRIVILEGES AND COST RELATED INJURY, 700,000.00 PER UNREBUTTED CLAIM, AND 2400.00 IN GOLD PER UNREBUTTED CLAIM PLUS 250,000.00 PER INCIDENT PER UNREBUTTED CLAIM.

III. Statement of Claim

Write a short and plain statement of the claim. Do not make legal arguments. State as briefly as possible the facts showing that each plaintiff is entitled to the damages or other relief sought. State how each defendant was involved and what each defendant did that caused the plaintiff harm or violated the plaintiff's rights, including the dates and places of that involvement or conduct. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

UNDER THREATS OF FINANCIAL HARDSHIPS, UNLAWFULLY COLLECTED FUNDS, SUSPENDING PRIVILEGES WITHOUT CONTRACTS (EXISTING) VIOLATIONS OF RIGHTS WITHOUT DUE PROCESS OF LAW. CAUSING FINANCIAL HARDSHIPS, STRESS, TORT, TRESSPASS.

IV. Relief

State briefly and precisely what damages or other relief the plaintiff asks the court to order. Do not make legal arguments. Include any basis for claiming that the wrongs alleged are continuing at the present time. Include the amounts of any actual damages claimed for the acts alleged and the basis for these amounts. Include any punitive or exemplary damages claimed, the amounts, and the reasons you claim you are entitled to actual or punitive money damages.

I ALSO CLAIMED IN AFFIDAVITS ALL UNLAWFULLY APPROPRIATED FUNDS BE RETURNED TO ALL AFFECTED PARTIES AND REIMBURSEMENTS OF FUNDS BE DISTRIBUTED TO ALL AFFECTED PARTIES.

V. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

2-28-18

Signature of Plaintiff

David Nickerson

Printed Name of Plaintiff

DAVID NICKERSON**B. For Attorneys**

Date of signing: _____

Signature of Attorney _____

Printed Name of Attorney _____

Bar Number _____

Name of Law Firm _____

Street Address _____

State and Zip Code _____

Telephone Number _____

E-mail Address _____